

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM **ANNUAL PERFORMANCE REPORT**

State Form 53475 (R3 / 1-11)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT **ENVIRONMENTAL STEWARDSHIP PROGRAM**

indiana Department of Environmental Management Office of Poliution Prevention and Technical Assistance

MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251 Telephone: (800) 988-7901

FAX: (317) 233-5627 E-mail: esp@idem.IN.gov

Please use this form if you are a member of the Indiana Environmental Stewardship Program (ESP) to report on progress toward objectives and targets AND certify ESP requirements continue to be achieved. Indiana ESP facilities must submit an Annual Performance Report (APR) by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months. Section C of your APR should be signed by your ISO 14001:2004 EMS Lead Auditor. Your APR should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, e-mail the APR to IDEM at esp@idem.IN.gov. Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the APR publicly available, which may include posting all portions of your report on the Indiana ESP Web site. If you have any questions, please contact IDEM at esp@idem.IN.gov or (800) 988-7901.

NI
Name of facility
Toyota Motor Manufacturing, Indiana, Inc.
Name of parent company (If applicable)
Toyota Motor Corporation
Street address (number and street)
4000 Tulip Tree Drive
City / State / ZIP code
Princeton, IN 47670
Web site of Facility/Company
CONTACT INFORMATION
Name of Contact (Mr. / Mrs. / Ms. / Dr.)
Ms. Lisa McLaughlin
Title
Environmental Specialist
Telephone number
812.387.2956
FAX number
812.387.3011
E-mail address
lisa.mclaughlin@tema.toyota.com
Mailing address (if different from facility address)
4000 Tulip Tree Drive, Mail Drop PE-1
City / State / ZIP Code
Princeton, IN 47670
REPORTING PERIOD
Reporting period dates (month, day, year)
1a. Is this the third Annual Performance Report of your membership term?
☐ Yes—If yes, answer question 1b.
☐ Yes—If yes, answer question 1b. X No—If no, skip to the "Change in Information" section of this report.
☐ Yes—If yes, answer question 1b. ☐ No—If no, skip to the "Change in Information" section of this report. 1b. Do you wish to renew your Indiana Environmental Stewardship Program membership? ☐ Yes—If yes, please complete all sections of this annual report.
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SECTION C

ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT

What do you need to do? Answer the following questions

Why do we need this information? Facilities need to have implemented an EMS that meets certain

	eria and use an ISO 14 ery 36 months to assess	-001:2004 EMS Lead Auditor at least about your sthe EMS.	r EMS.			
1.		ent date that an ISO 14001:2004 EMS Lead Auditor performed an EMS assessment at your facility? October 2010				
2.	Is the date of the most recent EMS assessment performed by an ISO 14001:2004 EMS Lead Auditor within the past 36 months?					
	Yes—If yes, skip to Question 3.					
	No—If no, please have your ISO 14001: 2004 EMS Lead Auditor complete and sign the following checklist, indicating whether or not your meets the listed criteria for ESP membership:					
	Yes No	Evidence of senior management support, commitment, and approval.				
	Yes No	A written environmental policy directed toward compliance, pollution prevention, and continuous improvement.				
	Yes No	Identification of the environmental aspects at the entity.				
	Yes No	Prioritization of the environmental aspects and a determination of those aspects deemed significant considering, at the minir environmental impacts and applicable laws and regulations.	mum,			
	Yes No	Established priorities, and environmental objectives and targets for continuous improvement in environmental performance a for ensuring compliance with applicable environmental laws, regulations, and permit conditions. Objectives and targets must beyond current legal requirements and specify the environmental media, types of pollution to be prevented or reduced, implementation activities, and projected time frames.	and t go			
1	Yes No	An established community outreach mechanism that includes identifying and responding to community concerns; informing community of important matters that affect the community; and reporting on the EMS, including reporting to the public on the environmental policy and significant aspects.	the •			
	Yes No	Incorporation of environmental and pollution prevention planning in the development of new products, processes, and service and modifications of existing processes.	es			
	Yes No	Evidence of clear responsibility for implementation, training, monitoring, EMS maintenance, taking corrective action, and enscompliance with applicable environmental laws, regulations, and permit conditions.	suring			
	Yes No	Documentation of the implementation procedures and the results of implementation.				
	☐ Yes ☐ No	Appropriate written EMS procedures.				
	Yes No	An annual evaluation of the EMS with written results provided to senior management and affected employees.				
	Signature of ISO 14	1001:2004 EMS Lead Auditor Date (month, day, year)				
	Signature of 150 14	Date (moral, day, year)				
3.	Were any deficiencies	s found during the most recent EMS assessment?				
	No—If no, skip to Question 4.					
	Yes—If yes, describe any deficiencies found and the corrective action taken to address each deficiency:					
4.	Name, title, and organ	nization of ISO 14001:2004 EMS Lead Auditor that conducted the most recent EMS assessment: Det Norske Veritas, John Le	aning			
5.		was used to perform the independent EMS assessment?				
	ISO 14001:2004 Certified audit Responsible Care EMS audit					
	Responsible Care 14001 audit					
		endent Assessment Protocol				
	Other (pleas	se specify):				
6.		o a recognized standard?				
	Yes—If yes,	, what standard does the EMS follow (please provide a copy of the most recent certificate)? X ISO 14001:2004				
		Responsible Care EMS				
	- <u> </u>	Responsible Care 14001				
	☐ No.					
7.		enior Management review of your EMS completed?				
	Month / Year:					
	vvno neaded the	e review (name and title)? Bill Harper, Environmental Assistant Manager				

7,625		 .				
8.	organizations.					ite visits by regulatory
	Scope of the compliance audit: Enhanced Env Management System Audit					
	Month(s) / Year(s): November 2010 Who conducted the audit(s) (e.g., facility staff composate third part): Toyota Corporate (TEMA)					
9.	Who conducted the audit(s) (e.g., facility staff, corporate, third party)? Toyota Corporate (TEMA) Explain the emergencies experienced within the facility during the past year. Were the applicable emergency and contingency plans detailed					
9,	effective? What changes, if any	, have been made to your faci	lity's emergen	cy or contingency pl	ans?	
.CYCER	There were no reportable en					
10.	Has your facility corrected all insassessments?	tances of potential environme	ntal non-comp	pliance and EMS not	n-conformance identified duri	ng your audits and other
	☑ Yes—If yes, briefly summariz improvements made as a result compliance audit(s). Observations made during audi	of your EMS assessment(s) o	Г	☐ No—If no, plea	• •	ch instances identified.
	"Plan, Do. Check, Act" impleme	nted to resolve and recheck is	sues.			
11.	(Optional) Please provide a narra Performance Initiative in Section made during the last calendar ye	E. You may limit the summa	ry to environm	IS objectives and tai ental aspects that a	rgets <u>other than those reporte</u> re <i>significant</i> and towards wh	ed as an Environmental nich <i>progress</i> has been
Envi	ronmental aspect	Progre	ss made this y	ear (e.g., quantitativ	e or qualitative improvement	s, activities conducted)
77						2

	TION D	ADDI	TIONAL INFO	RMATION		
	do we need this information? information will help IDEM to effe	ctively manage the			Answer the question	What do you need to do? as as completely as possible.
Envi	onmental Stewardship Program.					
1.	In addition to ESP, please list en	vironmental awards received of	or voluntary pr	ograms participated	in during the past twelve mo	nths.
2.	Pollution Partners, Energy Si Has your facility taken advantage					
-	consider.		, picase desci	nbe the implementat	ion process and list additiona	ai denetits idem snouid
	Expedited Air Permit Modifica					
3.	If your facility was not registered has ESP been instrumental in ac	to the ISO 14001 standard pri hieving registration?	or to becomin	g an ESP member, I	nas ESP helped you to pursu	e registration? If so, how
	N/A					
						
SECTION E ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS						
Why do we need this information? What do you need to do?						
	Facilities need to share the results of the environmental improvement Summarize your facility's progress on achieving the initiative					ess on achieving the initiative
	gory: Land & Habitat				you identified in the a	pplication or last year's APR.
	ator: Land & Habitat Conserv.	Baseline Quantity	Future	Goal Quantity	Current Quantity	Cost Savings
Calendar year		FY 2008	FY 2010		FY 2010	
Actual quantity (per year) 40 acres & 22		40 acres & 22,275 trees	80 acres	& 45,650 trees	80 acres & 45,650 trees	;
Normalized quantity (per year) n/a		n/a	n/a		n/a	
Basis for your normalizing factor (e.g., gallons of paint produced)						
Meas	surement unit (e.g., pounds)	total acreage & trees plar	nted			-
Brief Drou	Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress. Drought in Fall hinderd spraying of field.					
Please list any state, U.S. EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).						
(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.						

SECTION F

ENVIRONMENTAL IMPROVEMENT INITIATIVE

Why do we need this information?
Facilities need to show they are committed to improving their environmental performance.

What do you need to do? Refer to the Environmental Performance Table and answer the following questions.

Select the appropriate boxes in the following table to indicate the category and indicator(s) that represents the environmental improvement initiative selected by your facility. For the category and indicator selected, list the baseline year (e.g., 2009) and the future year (e.g., 2010). Next, list the baseline annual quantity (e.g., 5 tons) and future annual quantity (e.g., 2 tons) you are committing to achieve by the end of the future year.

Category	Indicator	Baseline Year 20 11	Future Year 20 12	Unit
☐ Material Procurement	☐ Recycled content			Pounds, tons
☐ Material Procurement	☐ Hazardous/toxic components			Pounds, tons
Suppliers' Environmental Performance	☐ Specify indicator:			As specified for the particular indicator
	☐ Materials used			Pounds, tons
	☐ Hazardous materials used			Pounds, tons
	Ozone depleting substances			CFC-11 equivalent
	used			pounds
LT.	☐ Total packaging materials used			Pounds, tons
☐ Water Use	☐ Total water used			Gallons
	☐ Electricity			kWh / MWh, Btu / MMBtu
	☐ Steam			kWh / MWh, gallons, ft3
	☐ Natural gas			Btu / MMBtu
	Diesel			Gallons
	☐ Propane / LPG	8		Btu / MMBtu, gallons
☐ Energy Use	Gasoline			Gallons
	☐ Solar			kWh / MWh
	☐ Wind			kWh / MWh
	☐ Landfill gas			Btu / MMBtu
	☐ Combined heat and power			kWh / MWh, Btu / MMBtu
	Other:			
☐ Land and Habitat	☐ Land and habitat conservation			Square feet, acres
	☐ Community land revitalization			Square feet, acres
	☐ Total GHGs			MTCO2E
	☐ VOCs			Pounds, tons
_	□ NOx, SOx, PM _{2.5} , PM ₁₀ , or CO			Pounds, tons
☐ Air Emissions	☐ Air toxics			Pounds, tons
	Odor			European Odour Units
	Radiation			Curies, Becquerels
	☐ Dust			Pounds, tons
	COD or BOD		<u>.</u> .	Pounds, tons
	Toxics		·	Pounds, tons
☐ Discharges to Water	☐ Total suspended solids		,	Pounds, tons
_ 0	Nutrients			Pounds, tons of N or P
	Sediment from runoff			Pounds, tons
	Pathogens			MPN/ml, CFU/ml
_	Landfill			Pounds, tons
☑ Non-hazardous Waste	☐ Incineration			Pounds, tons
☐ Hazardous Waste	Reused/recycled off-site			Pounds, tons, gallons
	☑ Other: Sludge Reduction	610 tons	560 tons	Pounds, tons, gallons
Noise	Noise			dBA
☐ Vibration	☐ Vibration			Inches per second
	Expected lifetime energy use			kWh / MWh, Btu / MMBtu
	Expected lifetime water use			Gallons
☐ Products	Expected lifetime waste to air, water, or land from product use			Pounds, tons
	☐ Waste to air, water, or land from disposal or recovery			Pounds, tons

line, employee training)? Addition of false bottom to sludge hopper, water reductions in sludge. Water sent to flood sheet, rather than disposal.	vnat activi	activities or process changes do you plan to undertake at your facility to ac	ccomplish your initiative (e.g., technology changes in a pa	rticular process
Addition of faise bottom to studge hopper, water reductions in studge. Water sent to flood sheet, rather than disposal.	ne, emplo	nployee training)? Addition of false bottom to sludge hopper, water reduct	ctions in sludge. Water sent to flood sheet, rather than dis	posal.

Э.	Does this initiative	address a	significant	t aspect in	ı your EMS
J.	DOES THE HIMSTONE	audiess a	signincam	ı aspeci in	ı your ⊑ivis

\triangle	res

No—If no, please explain why you believe this indicator should be included as an environmental improvement initiative:

6 A	CERTIFICATION AND PLEDGE			
On behalf of (name of facility) Toyota Motor Manufact	uring Indiana, Inc			
I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.				
We, Toyota Motor Manufacturing Indiana, Inc , commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.				
I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.				
Signature That Give	Title General Manager	Date (month, day, year) 3/9/11		
Printed signature Thad Goings				